Entered - 09/06/00 - sb CL00L0526 - DIANNE C. MITCHELL

00- <sub>R</sub> -1588

CLAIM OF: JANNA SESKIN

2419 North Decatur Road Decatur, Georgia 30033

For damages alleged to have been sustained as a result of vehicular damage due to a metal plate that had slipped off the construction cut on July 8, 2000 at West Peachtree Street between 14<sup>th</sup> and 16<sup>th</sup> Streets.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **JANNA SESKIN** the sum of \$690.73 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of vehicular damage due to a metal plate that had slipped off the construction cut on July 8, 2000 at West Peachtree Street between 14<sup>th</sup> and 16<sup>th</sup> Streets as is more particularly set forth in the within claim; said sum taken from and charged to account 2J01/529017/T31001, Settlement of Suits and Claims, Department of Law.

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APPROVED: SUSAN PEASE LANGFORD CITY ATTORNEY

ROSALIND RUBENS NEWELL DEPUTY CITY ATTORNEY

## **DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY**

Claim No. <u>00L052</u>	Date: September 18, 2000
Claimant /VictimJANNA SESKIN	
BY: (Atty)	
Address: 2419 North Decatur Roa	ad, Decatur, Georgia 30033 690.73 Bodily Injury \$  /ritten proper X Improper
Subrogation: Claim for Property damage \$	690.73 Bodily Injury \$
Date of Notice: 08/18/00 Method: W	ritten, proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.) X  ace: West Peachtree Street between 14th and 16th Streets
Date of Occurrence 07/08/00 Pla	ace: West Peachtree Street between 14th and 16th Streets
Department Public Works	Division: Sewer Operations
Employee involved	Disciplinary Action:
NATURE OF CLAIM: The claimant damaged her properly secured over the construction hole.	r vehicle when he drove over a metal plate that had not been
INVESTIGATION:	
Statements: City employee Claimant	Others Oral
Pictures X Diagrams Reports: Poli	ce Dept Report X Other
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
BASIS OF RECOMMENDATION:	
Function: Governmental	Ministerial X
Improper Notice More than Six Months	Ministerial X Other Damages reasonable X
City not involved Offer reje	ected Compromise settlement
Repair/replacement by Ins. Co.	Repair/replacement by City Forces
Claimant Negligent City Negligent	Repair/replacement by City Forces  X Joint Claim Abandoned
	Respectfully submitted,
	Dru Kushin
	INVESTIGATOR - DIANNE C. MITCHELL
RECOMMENDATION:	
Pay \$ 690.73 / Adverse	Account charged: 1A012J01_X2H01
Claims Manager:	Concur/date
Committee Action:	Council Action

FORM 23-61

		Mitchell
COUNCIL OF THE CITY OF ATLANTA	RE: CLAIM FOR DAMAGES	09/15/11
CLERK OF COUNCIL	Today's Date: 8.15-00	1703/00
City Hall 55 Trinity Avenue, S.W.	Today & Date	gru gru
	SED - 9-6-00 - SB ROVD	
Dear Clerk of Council: 00L05	26 - DIANNE MITCHELL	an B
This is to notify the City of Atlanta that I have suffered damag and/or \$bodily injury for which I contend to	es in the amount sum of \$ 6	D. property
1. Date of incident (month/day/ year)	2. Police called: Yes No	•.
3. Lixation of incident West Peachtree St. Bets		<b>\</b>
4. Name of your insurance company: All state	Policy No.	<u>65029529</u>
5. State what and how incident occurred: As I drove down		
that was placed in the road (manhole)	-Manhaledid not con	es entre hole
4 following a bad band, my car began put	ering The hole coused	a hole in my
6. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSERESULT IN YOUR CLAIM BEING DENIED AND MAY RES	ECTION. THE MAKING OF FA	LSE CLAIMS WILL 1919
7. The registered owner must make the claim for vehicle estimates of repair and proof of ownership of your vehicle (control of the control of	copy of the current tag receipt or	title).
Yourvehide: Mazch Protege 1999 (make) (year) (tag	3564M Janna	Seskin
(make) (year) (tag	number) (driv	ver's name)
City vehicle:		
(make) (City driver's nam	ie) (departm	ent/bureau)
8. Witness: <u>Flaron Sestin</u> 2419 N. [	lecatur Rd. Decatur E	a 30033 4-634-99
	dress)	(telephone number)
9. The acknowledgement of this claim in no way waives the Goby State law, nor is it an admission of liability on behalf of		
10. This claim should be mailed immediately to the address sho	own above.	
I HEREBY SWEAR OR AFFIRM THAT THE ABOVE	Janna Seskir	``
INFORMATION IS TRUE AND CORRECT.	(claimant's nam	ne)
anno oh	2419 N. Decatur R	٦.
	(address)	
	Decatur, Ga. 30	033
	(city and state	
•	4-325-9618	4-634-9914
	(work number)	(home number)

## **GENERAL RELEASE AND INDEMNIFICATION**

CLAIM NUMBER 00L0526	\$ 690.73
I do hereby, for myself, my heirs, executors, administration its officers and employees, from any and all claims, d	ANTA, the future receipt of which is hereby acknowledged, rators, and assigns, release and forever discharge said City, lemands, actions, causes of action, suits, damages, loss and ant of anything that has heretofore occurred, and particularly
which occurred on or about the8 <sup>th</sup> day of	July , 2000,
at or near West Peachtree Street between 14th and 16	th Streets
admission on the part of the City, its officers, agents, undersigned further covenants and agrees to indemnifuservants and employees, from any and all claims, daragents, servants and employees, may be called upon to And I now state that the only consideration for	rment of the above named sum is not to be considered as an servants or employees, of any liability whatsoever and the y and hold harmless the City of Atlanta, its officers, agents, mages or costs which the said City of Atlanta, its officers, o make as a result of the event hereinbefore referred to.  my signing this release and indemnification is the payment
	ement of any kind or nature has been made to or with me by e, and that I fully understand the meaning and intent of this
WITNESS my hand and seal this 20th	day of <u>September</u> , 2000.
$\overline{J}$	day ofSeptember
The above release was read and explained to, a	and signed by the said Janna Seskin
Notary Public, DeKalb County, Georgia  My Commission Expires Oct. 17, 2003	in our presence on the date above written.  Shytevia J. Hotels  WITNESSES